PTO/SB/01 (05-03)

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DECLARATION FOR UTILITY OR

Attorney Docket Number

MSH - 275

| DES | rirst nam | ed inventor | Robert | G. Graha | m | | | |
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| PATENT APPLICATION | | | COMPLETE IF KNOWN | | | | | |
| (37 CF | R 1.63) | Application | Number | | | | | |
| ▼ Declaration | Declarat | ion Filing Date | | N | 17 20 | 02 | | |
| X Submitted OR With Initial | | ed after Initial Art Unit | | Novembe | er 17, 20 | 03 | | |
| Filing | (37 CFR required | 1.16 (e)) Evaminer | Vame | + | | / | | |
| | i cquii o | | | | <u></u> | | | |
| I h reby declare that: | | | | | | | | |
| Each inventor's residence, ma | iling address, a | nd citizenship are as stated | pelow next to | their name. | | | | |
| | _ | • | | | ab io alaimed . | and for | | |
| I beli ve the inventor(s) named which a patent is sought on the | | |) of the subje | ct matter wni | cn is claimed a | and for | | |
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| PYROLYZING GASIFIC | CATION SYS | TEM AND METHOD OF | JSE | | | | | |
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| | | (Title of the Invention | | | | | | |
| th specification of which | | | | | | | | |
| X is attached hereto | | | | | | 1 | | |
| OR | | | | | | | | |
| was filed on (MM/DD/Y | ··· | | tad Ctataa A | anlination No. | | | | |
| Was filed off (WIWDD) | · · · · · · · · · · · · · · · · · · · | as or | ited States A | oplication Nui | mber or PCT I | nternational | | |
| Application Number | | and was amended on (MM | DD/YYYY) | | (if | applicable). | | |
| I h reby state that I have reviewed and understand the contents of the above identified specification, including the claims, as | | | | | | | | |
| am inded by any amendment specifically referred to above. | | | | | | | | |
| I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for | | | | | | | | |
| continuation-in-part application | ns, material info | ormation which became ava | iable betwee | n the filing da | ate of the prio | r application | | |
| and the national or PCT intern | | | | | | | | |
| I her by claim foreign priority inv ntor's or plant breeder's n | r benetits unde iahts certificate | r 35 U.S.C. 119(a)-(d) or (t (s). or 365(a) of anv PCT in |), or 365(b) o emational an | of any foreigr plication which | n application(s ch designated | at least one | | |
| country other than the United | States of Amer | ica, listed below and have a | so identified t | pelow, by che | cking the box | , any foreign | | |
| application for patent, inventor | | | any PCT inter | mational app | lication having | a filing date | | |
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| Number(s) | Country | (MM/DD/YYYY) | Not C | | Yes | No | | |
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| Additional foreign applica | tion numbers ar | e listed on a supplemental p | riority data sh | eet PTO/SB/ | 02B attached | hereto. | | |

[Page 1 of 2] [Page 1 or 2]
This collection of information is required by 37 CFR 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



DECLARATION — Utility or Design Patent Application

| Dir ct all correspondence to: | | r Number ode Label | 008 | 131 | | OR | Cor | теѕро | ondenc address below |
|---|-----------|-----------------------|-----|------------------------|-------------------------------------|-----|-------------|---------|----------------------|
| Name | | | | | | | | | |
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| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. | | | | | | | | | |
| NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor | | | | | | | | | |
| Given Name (first and middle [if any]) | Robert G. | | | | Family Name or Surname Grahar | | | ham | ı |
| Inventor's Signature | Yel | - | | | | | | | Date |
| Residence: City | State | | | Count | Country Citizer | | | tizen | ship |
| Presque Isle | Michigan | | | US US | | | US | | |
| Mailing Address 6027 East Grand Lake Road, Presque Isle, Michigan 49777 | | | | | | | | | |
| City | State | | | ZIP | | | T | Country | |
| Presque Isle | Michigan | | | | 49777 | | | | US |
| NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor | | | | | | | | | |
| Given Name (first and middle [if any]) | | | | Family Name or Surname | | | _ | | |
| Inventor's Signature | | | | | | | | | Date |
| Residence: City | State | | | Country | | Ci | Citizenship | | |
| Mailing Address | | | | | | | | | |
| City | State | | | | ZIP | | C | ountr | у |
| Additional inventors or a legal representative are being named on thesupplemental sheet(s) PTO/SB/02A or 02LR attached hereto. | | | | | | | | | |

*Total of

forms are submitted.

PTC/SB/81 (05-03)
Approved for use through 11/30/2005. OMB 0651-0035

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Application Number Filing Date November 17. 2003 First Named Inventor POWER OF ATTORNEY OR Robert G. Graham Title Pyrolyzing Gasification System **AUTHORIZATION OF AGENT** Art Unit **Examiner Name Attorney Docket Number** MSH - 275I hereby appoint: Place Customer Practitioners at Customer Number Number Bar Code 008131 I abel here OR Practitioner(s) named below: Name Registration Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Place Customer Practitioners at Customer Number. Number Bar Code Label here OR Firm or Individual Name Address Address City State Zip Country Telephone Fax am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name <u>Graham</u> Signature Date Telephone NOV 5,03 (989) 631-4551 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.